UNIFORM HAZARDOUS 1. Generator's US EF WASTE MANIFEST C.4A 4D 40 48 46	l Doc	fanifest ument No. 1 5 1			ation in the shaded required by Federa
3 Generator's Name and Mailing Address McDonne I Douglas Aircraft Co.			A. Sta	te Manifest Docur	nent Number 1.76991
19503 S. Normandie Avenue Torrance, CA 90502 4. Generator's Phone (213) 533-6677 K. L. An	darena 722 M/S C	6-10		te Generator's ID	4040454649
5. Transporter 1 Company Name 6.	application of the state of the		C. Sta	te Transporter's I	
J.C.I. Environmental Services IC 7. Transporter 2 Company Name 8.	US EPA ID Number	<u> </u>	E. Sta	te Transporter's I	(213)26E
9. Designated Facility Name and Site Address 10		111.		nsporter's Phone ite Facility's ID	- 1007
Chem Tech Systems, Inc.			L H. Fac	HT 6 8 (310151618
3650 E. 26th St. Vernon, CA 90023	<u>elelololbloltial</u>	6 9 1 12. Conta	ainers	(213)266	3397
11. US DOT Description (Including Proper Shipping Name, Hazard	Class, and ID Number)	No.	Туре	Quantity	Unit W Wt/Vol State
Maste Steam-Cleaning Water					EPA/Ot
(California Regulated Waste Only.)	- E	0 10 12	T IT	01310100) G State
	100 mg	111	1	1111	EPA/Ot
C .					State
		111	L	1111	EPA/Ot
d.	100 miles			1. 3	EPA/Ot
J. Additional Descriptions for Materials Listed Above		111_	K. Ha a.	andling Codes for	Wastes Listed Abo
Alkaline cleaning agent - 5% Oil & grease - 5% Water - remainder			C.	<u> </u>	d.
15. Special Handling Instructions and Additional Information					
Guide# 31 Use gloves, goggles, respirator.		ILE #88			
187-T	•••	탑 3 5			
GENERATOR'S CERTIFICATION: I hereby declare that the cand are classified, packed, marked, and labeled, and are in all national government regulations.	ontents of this consignment ar Il respects in proper condition f	e fully and actor transport i	curately by highy	y described above way according to a	e by proper shippin applicable internati
If I am a large quantity generator, I certify that I have a progra to be economically practicable and that I have selected the p present and future threat to human health and the environmen	racticable method of treatment	STOTAGE OF	aisposa	i currentiv avallau	ie to lie which iiiii
present and future threat to human health and the environmen generation and select the best waste management method the Printed/Typed Name	at is available to me and that I	can afford.			Month
Kris L Anderson Acent for M.D.A.C.	1 WAY		~		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name	Signature	Version of			Month
18. Transporter 2 Acknowledgement of Receipt of Materials	1 4	75)	365	1014
	Signature				Month
Printed Typed Name		1.14			■ Hoo
19. Discrepáncy Indication Space	1.24		and the second second		
					944
	is materials covered by this ma	anifest excep	it as not	ted in Item 19.	Month

Printed/Typed Name	Signatu(e	Month Day Year
Kris L. Anderson Agent for M.D. A.		
17. Transporter 1 Acknowledgement of Receipt of Materials		-
Printed/Typed Name	Signature Quincy	Month Day Year
18. Transporter 2 Acknowledgement of Receipt of Materials		1014101690
Printed/Typed Name	Signature	Month Day Year
19. Discrepancy Indication Space		11111
19. Discrepancy Indication Space		Month Day

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Signature

DHS 8022 A (1/88)

EPA 8700—22 (Rev. 9-88) Previous editions are obsolete

Do Not Write Below This Line

Month

Day

Year